

AUSTIN CITY CLERK FORM C/OH
RECEIVED SHEET PG 1

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**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Scruggs, Edward (Mr.)**14 ACCOUNT #** (Ethics Commission filers)
09090909**15 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****16 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

299.40

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$

0.00

4. TOTAL POLITICAL EXPENDITURES

\$

1,776.34

**CONTRIBUTION
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

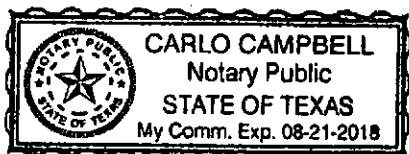
\$

0.00

**OUTSTANDING
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

15,221.90

17 AFFIDAVIT

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report
is true and correct and includes all information required to be reported by
me under Title 15, Election Code.

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Edward Scruggs, this the 15 day
of June, 20 15, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 3/7

2 FILER NAME Scruggs, Edward (Mr.)

3 ACCOUNT # (Ethics Commission filers)
09090909

4 Date

04/10/2015

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Cardenas, Alessandro (Mr.)

6 Contributor address; City; State; Zip Code
7500 Shadow Ridge Run # 37
Austin, TX 78749

7 Amount of
contribution (\$)

\$33.48

8 In-kind contribution
description (if applicable)
In-kind assistance by
purchasing supplies for
campaign signs at
Home Depot.

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Campaign Consultant

10 Employer (See Instructions)
Self Employed

Date

04/10/2015

Full name of contributor ☐ out-of-state PAC (ID# _____)

Cardenas, Alessandro (Mr.)

Contributor address; City; State; Zip Code
7500 Shadow Ridge Run # 37
Austin, TX 78749

Amount of
contribution (\$)

\$65.92

In-kind contribution
description (if applicable)
In-kind assistance by
purchasing ink
cartridges & other office
supplies at Office Max.

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Campaign Consultant

Employer (See Instructions)
Self Employed

Date

02/20/2015

Full name of contributor ☐ out-of-state PAC (ID# _____)

Littlefield, Mark (Mr.)

Contributor address; City; State; Zip Code
7705 Vail Valley Dr
Austin, TX 78749

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)
In-kind assistance for
campaign poll - status
settled at the end of the
campaign.

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Consultant

Employer (See Instructions)
Littlefield Consulting

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/3 Report: 4/7		2 FILER NAME Scruggs, Edward (Mr.)		3 ACCOUNT # (TEC filers) 09090909	
4 Date 04/13/2015		5 Payee name Capital One Bank (USA)			
6 Amount (\$) \$8.95		7 Payee address City; State; Zip Code 4301 W William Cannon Dr Ste H Austin, TX 78749			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Low Balance Bank Fee <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 02/20/2015		Payee name Chalmers, Rho (Ms.)			
Amount (\$) \$250.00		Payee address City; State; Zip Code 7211 Bill Hughes Rd Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Web site, graphics, and technical services <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/02/2015		Payee name Facebook Ads			
Amount (\$) \$12.02		Payee address City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Cost of Facebook Ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 01/05/2015		Payee name Google Services			
Amount (\$) \$13.54		Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> google ads <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/3 Report: 5/7		2 FILER NAME Scruggs, Edward (Mr.)		3 ACCOUNT # (TEC filers) 09090909	
4 Date 02/03/2015		5 Payee name Google Services			
6 Amount (\$) \$20.00		7 Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Google accounts for campaign staff <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 03/05/2015		Payee name Google Services			
Amount (\$) \$16.42		Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Google accounts for campaign staff <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 01/26/2015		Payee name OfficeMax			
Amount (\$) \$21.61		Payee address City; State; Zip Code 5400 Brodie Ln Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> IRS Forms for 1099-MISC reporting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 01/05/2015		Payee name Sage Payment Solutions			
Amount (\$) \$379.15		Payee address City; State; Zip Code 1750 Old Meadow Road # 300 McLean, VA 22102			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Banking fees for on-line Contributions <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/3 Report: 6/7		2 FILER NAME Scruggs, Edward (Mr.)		3 ACCOUNT # (TEC filers) 09090909	
4 Date 02/02/2015		5 Payee name Sage Payment Solutions			
6 Amount (\$) \$7.00		7 Payee address City: State: Zip Code 1750 Old Meadow Road # 300 McLean, VA 22102			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Merchant Account bank fee. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 02/23/2015		Payee name Scruggs, Ed (Mr.)			
Amount (\$) \$900.00		Payee address City: State: Zip Code 5848 Back Bay Ln Austin, TX 78739			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Partial repayment of campaign loan. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 04/15/2015		Payee name Scruggs, Ed (Mr.)			
Amount (\$) \$141.65		Payee address City: State: Zip Code 5848 Back Bay Ln Austin, TX 78739			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Repayment of loan to candidate <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 01/15/2015		Payee name The UPS Store			
Amount (\$) \$6.00		Payee address City: State: Zip Code 4301 W. William Cannon Dr Suite B 150 Austin, TX 78749			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Notary Public for campaign finance statement <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			

**CANDIDATE/OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT****FORM C/OH - FR**

The Instruction Guide explains how to complete this form.

**** Complete only if 'Report Type' on page 1 is marked 'Final Report' ****

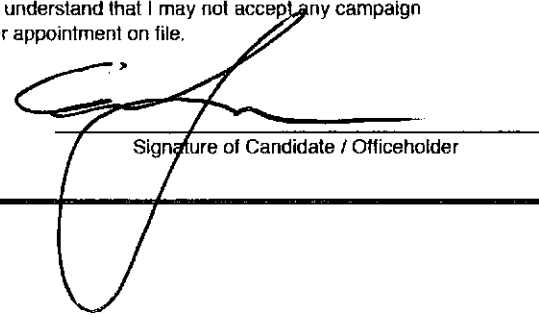
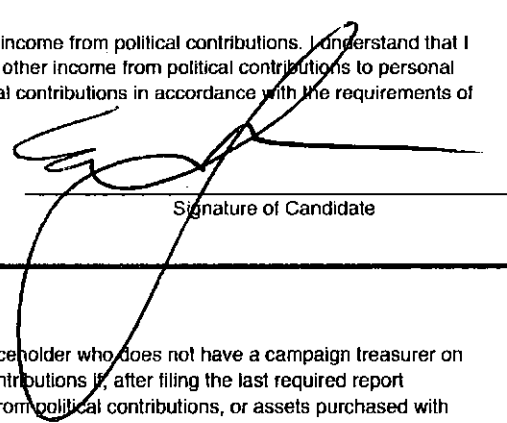
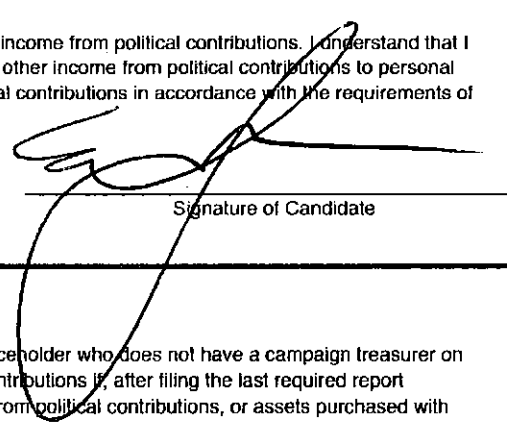
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1 C/OH NAME Scruggs, Edward (Mr.)**2 ACCOUNT #** (Ethics Commission filers)

09090909

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.


Signature of Candidate / Officeholder**4 FILER WHO IS NOT AN OFFICEHOLDER****** Complete A & B below only if you are not an officeholder ******A. CAMPAIGN FUNDS****Check only one:**☒ I do not have unexpended contributions or unexpended interest or income earned from political contributions.☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.**B. ASSETS****Check only one:**☒ I do not retain assets purchased with political contributions or interest or other income from political contributions.☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.
Signature of Candidate**5 OFFICEHOLDER****** Complete this section only if you are an officeholder ****☐ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.
Signature of Officeholder